

Please type a plus (+) sign inside this box -

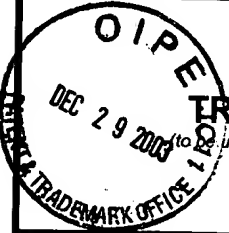


PTO/SB/21 REV 1 (12/97)

Approved for use through 09/30/2000. omb 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

 TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	09/458,581	
	Filing Date	12/09/99	
	First Named Inventor	M. Pinarbasi	
	Examiner Name	R. McDonald	
	Group Art Unit	1753	
Total Number of Pages in This Submission	17 + postcard	Attorney Docket Number	SA998141

ENCLOSURES (check all that apply)

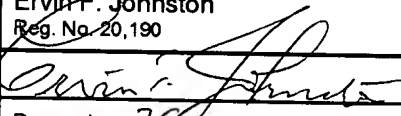
- | | | |
|---|--|---|
| <input type="checkbox"/> Fee Transmittal Form
<input type="checkbox"/> Fee Attached
<input checked="" type="checkbox"/> Amendment/Response
<input type="checkbox"/> After Final
<input type="checkbox"/> Preliminary Amendment
<input type="checkbox"/> Extension of Time Request
<input type="checkbox"/> Express Abandonment Request
<input type="checkbox"/> Supplemental Information Disclosure Statement
<input type="checkbox"/> PTO Form 1449
<input type="checkbox"/> () cited references
<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Response to Missing Parts/Incomplete Application
<input type="checkbox"/> PTO Form 1533
<input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment w/Recordation Sheet
<input type="checkbox"/> Drawing(s)
<input type="checkbox"/> Request for Drawing Amendment
<input type="checkbox"/> Licensing-related Papers
<input type="checkbox"/> Petition Checklist and Accompanying Petition
<input type="checkbox"/> To Convert a Provisional Application
<input type="checkbox"/> Power of Attorney, Revocation
<input type="checkbox"/> Change of Correspondence Address
<input type="checkbox"/> Terminal Disclaimer | <input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<u>POSTCARD</u>

_____ |
|---|--|---|

Remarks:

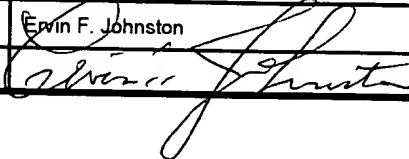
RECEIVED
JAN 02 2004
TC 1700

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	Ervin F. Johnston Reg. No. 20,190
Signature	
Date	December 26, 2003

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:
Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on this date: December 26, 2003

Typed or printed name	Ervin F. Johnston		
Signature		Date	December 26, 2003